Union the Peperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless & displays a yeard OMB control number. Approved for use through 7/31/2006 OMB 0651-0032 U.S. Poleni and Trademark Office: U.S. DEPARTMENT OF COMMERCE Substitute for Form PTO-875 Effective December 8, 2004 or Dockel Humber APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN OR FOR HUMBER FILED SMALL ENTITY BASIC FEE NUMBER EXTRA (37 CFR 1 18(4) (b) or (c)) RATE (\$) FEE O N/A RATE (\$) SEARCHFEE N/A FEE (\$) NVA 150.00 137 CFR 1 16(N. H. or (m)) N/A -N/A 300.00 EXAMINATION FEE N/A NA \$250. (37 CFR 1 16(a), (p), or (q)) NA NIA \$500 N/A TOTAL CLAIMS NA \$100 (37.CFR 1 16(1)) NA \$200 INDEPENDENT CLAIMS ununa 50 • X\$ 25 (37 CFR 1 16(N)) X\$50 OR C eunim X100 If the specification and drawings exceed 100 X200 APPLICATION SIZE sheets of paper, the application size fee due FEE . (37 CFR 1 16(4)) is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR | 164)) +180= 'If the difference in column 1 is less than zero, enter "0" in column 2. +360= TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3) CLAIMS SMALL ENTITY OTHER THAN OR HIGHEST REMAINING SMALL ENTITY NUMBER PRESENT ENDMENT 00 AFTER RATE (\$) PREVIOUSLY AMENDMENT EXTRA ADDI-RATE (\$) PAID FOR Total TIONAL ADDI-(3) CFR (.16(i)) Minus FEE (\$) TIONAL. independent . pr cfR 1.10(h)) X\$ 25 FEE (1) Minus X\$50 OR ひの Application Size Fee (37 CFR 1.16(s)) X100 X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I)) +180= our paid +360= OR MADD'L FEE TOTAL 250.00. OR (Column 1) ADD'L FEE (Column 2) CLAIMS (Column 3) 8 HIGHEST REMAINING NUMBER PRESENT AFTER. AMENDMENT ENDMENT RATE (\$) PREVIOUSLY EXTRA ADDI-RATE (\$) Total corore 1.10(1) TIONAL FEE (5) PAID FOR ADOI-Minus TIONAL FEE (\$) Independent -X\$ 25 Minus X\$50 OR Application Size Fee (37 CFR 1.16(6)) X100 X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +180= +360= OR TOTAL TOTAL ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "o' in column 3.

If the Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For' IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1 column 1 is the highest number found in the appropriate box in column 1 is the highest number found in the appropriate box in column 1 is the highest number found in the appropriate box in column 1 is the highest number found in the appropriate box in column 1 is the highest number found in the appropriate box in column 1 is the highest number found in the appropriate box in column 1 is the number of the number

is collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to piccess) an application. Confidentiality is poverned by 35 U.S.O. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. FIO to process) an application. Contractioning is governed by 35 U.S.U. 122 and 37 U.M. 1.14. This consection is estimated to take 12 minutes to complete, biding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS